soluble in water, slightly so in alcohol, alkaline to taste and in reaction, non-hygroscopic, efflorescent. It represents 45 per cent. by weight of arsenic. Notwithstanding this large proportion of arsenic it can be given in doses of 3 grains without poisonous symptoms. Its therapeutic dose is between ½ to 1½ grain daily. It may be taken indifferently by mouth or by means of the hypodermic needle. Gautier finds much the same indications for the use of this new salt, termed by him *arrhenal*, as for the cacodylates.—*Les Nouveaux Remèdes*, 1902, vol. xviii. p. 97.

Organotherapy in Pancreatic Disease.—Dr. H. Salmon reports *in extenso* the histories of two patients with pancreatic disease in which there were marked fatty stools (steatorrhœa) and distinct azotorrhœa—increased nitrogen elimination. In their treatment he made use of a newer preparation of the pancreas, pankreon, which had a marked salutary effect on the general metabolism and a distinctly curative effect on the fatty indigestion.—*Berliner klin. Wochenschrift*, 1902, vol. xxix. p. 120.

Bromocoll in Epilepsy.—Drs. Reich and Ehrke detail the disadvantages that are incident to the use of bromides in the treatment of epilepsy and take up the study of some of the newer organic combinations of bromide, bromipin, bromalin, and a new claimant, bromocoll, a combination of bromine, tannin and gelatin which contains about 21 per cent. of bromine. It has been shown that this combination passes into the intestines unaffected, but in the presence of an alkaline medium is broken down and liberates the bromine in some non-irritating form. The bromine is ultimately eliminated in the urine. The results of the author's experimentation tend to show that the action of this compound on the motor ganglion cells is similar to that of inorganic bromides. He found that as far as male epileptics was concerned the action of bromocoll was as marked as that of potassium bromide, but was not more active; that the remedy could be taken in large doses without disturbing the digestion, that the bromide acne appeared only when large doses were given and only in susceptible individuals, and, moreover, the eruption when it did appear healed very readily. The authors conclude that in bromocoll a good preparation has been obtained which, because of its cheap price compared with other organic bromides, should be tried in patients requiring bromide therapy.

The authors conclude as follows concerning the efficacy of bromocoll in epileptic conditions: (1) The drug approximately equals in strength potassium bromide; (2) it is pleasant to take even in large doses; (3) gastric and intestinal disturbances do not occur; (4) acne is seen only exceptionally after large quantities, and then is slight and shows a tendency to heal; (5) nervous symptoms also are rare. It is therefore indicated to try it where the bromides are not well stood, and its relatively cheap price should aid in its rapid introduction.—*Therapeutische Monatshefte*, 1902, No. 2, p. 75.

On Urinary Antiseptics.—Dr. R. Stern has shown by a series of bacteriological tests the comparative bactericidal power of a number of the older

and newer remedies. In doses of from 45 to 60 grains a day both urotropin and salicylic acid have a marked bactericidal power. They not only hinder the development of the ordinary micro-organisms, but kill them as well. Salol, camphoric acid, methylene blue, oleum santali and oleum terebinthinæ prevent the development of bacteria, but only in very large and continued dosage. Balsam of copaiba, boric acid, potassium chlorate, and uva ursi were without any action on bacteria. The author brought out the interesting feature that the administration of urotropin or salicylic acid was of great value just preceding instrumentation of any kind. In the deep seated bacterial infections, such as occur in tuberculosis, etc., the urinary bactericidal agents are of very secondary value. The author maintains that the continuous use of urotropia in typhoid to disinfect typhoid stools is unadvisable, inasmuch as large doses used over considerable intervals of time can give rise to marked if not serious kidney irritation.—*Allegemeine med. Central Zeitung*, 1902, vol. lxxi. p. 1.

[The dose of urotropin as above given is decidedly larger than is considered to be necessary.—R. W. W.]

Forman and its Applications.—Dr. H. Suchanek speaks of the limitations in the use of this new formaldehyde-containing compound, and recommends its use in the early days of an acute nasal or laryngeal catarrh in order to both render the attack milder and shorter.—*Fortschritte der Medicin*, 1902, vol. xx. p. 92.

Chronic Bright's Disease and its Surgical Treatment.—Dr. George M. Edebohls gives a complete *résumé* of the question of priority of the first advocate of the surgical treatment of chronic Bright's disease. The article is of value from the bibliographical stand-point.—*Medical Record*, 1902, vol. lxi. p. 651.

Reduction of Sodium Nitrate in the Animal Body.—Drs. C. Binz and P. Gerlinger have again gone over this entire subject. Experiments which show that sodium nitrate can act as a poison, owing to its conversion into nitrite in the animal body, have all been conducted with the relatively non-delicate iodine reaction. In the new experiments a mixture of α-naphthylamin and sulphanilic acid to test the excretions, especially the urine, was used. The quantitative estimates were made by pouring the urine into a concentrated solution of ammonium chloride, passing carbonic acid gas through the mixture and then decomposing by heating. The liberated nitrogen is then read off in a suitable azotometer and the amount of nitrite calculated from this. In all the animals tested appreciable amounts of nitrites were found in the urine, and the presence of methæmaglobin in the blood was manifest by its brown color and the grayish tinge of the mucous membranes. The experiments are interesting not only from a toxicological point of view, but also in that they prove that a true reduction may go on in the body. Owing to the small therapeutic doses, little need be feared from this process in man.—*Archives Internationales et Pharmacodynamie et de Therapie*, 1902, vol. ix., fasc. 5 and 6, p. 441.